integral therewith a plurality of protuberances formed on at least one of opposite surfaces thereof, said method comprising the steps of:

inserting said anastomosis member into lumens of said first and said second blood vessels;

B2 bringing said plate member into contact with at least one of said first and said second blood vessels; and

engaging said first and said second blood vessels with said protuberances so as to prevent the dislocation of said first and said second blood vessels at said anastomosed site.

REMARKS

Entry of the foregoing amendments, and reexamination and reconsideration of the subject application, pursuant to and consistent with 37 C.F.R. § 1.104 and § 1.112, and in light of the following remarks, are respectfully requested.

Amendments

Claims 1 and 15 have been amended to recite that the "projections" are protuberances, which are defined in dictionaries as having a rounded geometry, and as supported at least by Figs. 12 and 15, and by the disclosure at page 8 (lines 6-7, noting the "diameter of 30 μm") and page 17 (line 3, same). In addition, the claims recite that the plate and the protuberances are integral with each other, as supported throughout the specificiation. No new matter is added.

Rejection under 35 U.S.C. 102

Claim 1 stands rejected hereunder as being anticipated by Tessmann (*et al.*), which rejection is respectfully traversed.

As now amended, claim 1 requires the projections to be protuberances, rounded projections. Tessman, in Figs. 4-8, clearly shows that the projections of that device are sharp ("hook-like projections 16" at col. 2, ln. 38-39; "relatively sharp teeth 216" at col. 2, ln. 54). Because Tessman does not disclose dull projections, but only sharp projections, claim 1 is now not anticipated by this reference, and so this rejection should now be withdrawn.

Rejections under 35 U.S.C. 103

Claims 1-4, 6, 9, 10, and 15 stand rejected as obvious over Schnepp-Pesch in view of Tessmann, which rejection is respectfully traversed.

The references are not properly combined. Schnepp-Pesch is designed to widen a stenosis, such as an artery or duct. As shown above, Tessmann has sharp protrusions. Note that the Schnepp-Pesch device has a smooth surface. The use of a sharp surface would be inadvisable for widening a stenosis because of the possibility of tearing the tissue as the device is expanded and the stenosis is stretched. Note that Tessmann (in the Abstract) mentions that the device is to be turned *in vivo* to lock it into place with the sharp projections. Thus, expanding a device in a stenosis that has sharp projections would tear the tissue; without the projections, the tissue would slide over the device as it expands. Accordingly, the references are not properly combined because the combination device would damage the tissue.

The rejection alleges that the purpose of Tessmann is motivation to include projections in the device of Schnepp-Pesch, yet there is no motivation for the reason just mentioned: the combined device would damage tissue. Further, no such motivation exists because the intent of Schnepp-Pesch is to widen an existing passage, not merely to keep a passage open asTessmann's stent (designed for use in the ureter, the sharp projections locking the device in place and preventing it from migrating into the bladder and down the urethra; Background section of Tessmann).

Further, the alleged motivation, that the projections of Tessmann would prevent the Schnepp-Pesch device from slipping is inapplicable because the Schnepp-Pesch device is a memory metal device that expands when heated. Accordingly, the device, when heated to body temperature, will inherently expand and press on the stenosis tissue, so there is little chance of the device slipping because of the increased friction. Further, as mentioned above, the expanding tissue must slip over the device else the tissue would be torn apart. In addition, a device that does not expand, such as that of Tessmann, requires teeth to engage the interior surface of the stenosis to prevent movement because its size does not change upon heating to body temperature (it will change minimallyl because of

normal thermal expansion, but clearly such expansion is not of the same magnitude as that of a memory metal device).

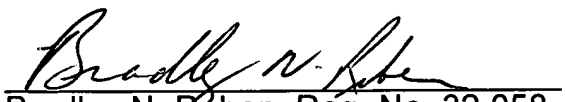
With respect to rejected claim 15, the device formed by combining these references would not be used as claimed therein because such use would require that the device expand after insertion into the lumens. Accordingly, tearing of the tissue would be expected to occur due to the sharp projections.

Accordingly, these rejections should now be withdrawn.

Petition for Extension of Time

Pursuant to the provisions of 37 CFR 1.136(a), Applicants hereby petition for a two month extension of time to 28 February 2003 in order to respond to the Office Action dated 30 September 2002. A check in the amount of $ 410.00 is attached. If this paper should necessitate any fees under 37 C.F.R. § 1.16 or § 1.17 not provided, or if there has been an overpayment, please debit or credit as necessary the Deposit Account No. 502144.

Respectfully submitted,



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26 February 2003

APPENDIX SHOWING MARK-UPS OF AMENDMENTS

IN THE CLAIMS:

1. (Amended.) An anastomosis member to be arranged at an anastomosed site of first and second blood vessels to carry out the anastomosis of said first and said second blood vessels, said anastomosis member having a generally cylindrical body comprising at least one plate member to be brought into contact with both of said first and said second blood vessels, said plate member having integral therewith a plurality of [protrusions] protuberances formed on at least one of opposite surfaces thereof to be engaged with at least one of said first and said second blood vessels so as to prevent the dislocation of said first and said second blood vessels at said anastomosed site.

15. (Amended.) An anastomosis method for the anastomosis of first and second blood vessels by the use of an anastomosis member to be arranged at an anastomosed site of said first and said second blood vessels, said anastomosis member having a generally cylindrical body comprising a pate member having integral therewith a plurality of [protrusions] protuberances formed on at least one of opposite surfaces thereof, said method comprising the steps of:

inserting said anastomosis member into lumens of said first and said second blood vessels;

bringing said plate member into contact with at least one of said first and said second blood vessels; and

engaging said first and said second blood vessels with said [protrusions] protuberances so as to prevent the dislocation of said first and said second blood vessels at said anastomosed site.